05/14/2024 11:17:28am

Fill in this information to identify your		
United States Bankruptcy Court for the: DISTRICT OF SOUTH DAKOTA		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)
Your full name		
Write the name that is on	ASNIEION	
government-issued picture identification (for example	First Name	First Name
your driver's license or	Anne	
passport).	Middle Name	Middle Name
,	Nordstrom	
Bring your picture identification to your meet	Last Name ng	Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you		
have used in the last 8 years	First Name	First Name
Include your married or	Middle Name	Middle Name
maiden names and any assumed, trade names an "doing business as" name		Last Name
Do NOT list the name of a separate legal entity such	•	First Name
a corporation, partnership LLC that is not filing this	or Middle Name	Middle Name
petition.	Last Name	Last Name
	Business name (if applicable)	Business name (if applicable)
	Business name (if applicable)	Business name (if applicable)

Deb	btor 1 Ashleigh Anne N	ordstrom	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>5</u> <u>1</u> <u>5</u> <u>3</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9xx - xx	9xx - xx
4.	Your Employer Identification Number (EIN), if any.	EIN	
		EIN — — — — — — —	
5.	Where you live		If Debtor 2 lives at a different address:
		7913 S Merrit Place Number Street	Number Street
		Sioux Falls SD 57108	
		City State ZIP Code Lincoln	City State ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
Р	Part 2: Tell the Court	About Your Bankruptcy Case	
Ban	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top	Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.
	are choosing to file under	☑ Chapter 7	
		Chapter 11	
		Chapter 12	
		Chapter 13	

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Deb	otor 1 Ashleigh Anne	Ashleigh Anne Nordstrom			Case number (if known)			
8.	How you will pay the fee	cour pay	Il pay the entire fee when I file my port for more details about how you may with cash, cashier's check, or money alf, your attorney may pay with a credit	pay. Typically, if you a order. If your attorney i	re paying the fee yourself, you may s submitting your payment on your			
			ed to pay the fee in installments. If yiduals to Pay The Filing Fee in Install					
		By la than fee i	quest that my fee be waived (You make aw, a judge may, but is not required to a 150% of the official poverty line that a in installments). If you choose this oping Fee Waived (Official Form 103B) and	, waive your fee, and mapplies to your family s cion, you must fill out th	nay do so only if your income is less ize and you are unable to pay the e Application to Have the Chapter 7			
9.	Have you filed for	☑ No						
	bankruptcy within the last 8 years?	☐ Yes.						
		District _		When				
		District		MM / DD / Y				
		District _		When	Case number			
		District _			Case number			
10	Are any bankruntov	□ No		MM / DD /	YYYY			
10.	Are any bankruptcy cases pending or being	✓ No						
	filed by a spouse who is not filing this case with	☐ Yes.						
	you, or by a business	Debtor _		Rela	tionship to you			
	partner, or by an affiliate?	District _		When	Case number,			
	unnate.			MM / DD /	YYYY II KNOWN			
		Debtor _		Rela	tionship to you			
		District _		When	Case number,			
				MM / DD / Y	YYYY if known			
11.	Do you rent your	☐ No.	Go to line 12.					
	residence?	✓ Yes.	. Has your landlord obtained an evict	ion judgment against y	ou?			
			No. Go to line 12.					
			Yes. Fill out Initial Statement and file it as part of this bankru	-	ment Against You (Form 101A)			

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Deb	tor 1	Ashleigh Anne Nord	stro	m	Case number ((if known)		
Pá	art 3:	Report About An	у Ві	ısine	sses You Own as a Sole Proprietor			
12.	•	ı a sole proprietor full- or part-time ss?	☑		Go to Part 4. Name and location of business			
	busines individu separate	oroprietorship is a s you operate as an al, and is not a e legal entity such as ration, partnership, or			Name of business, if any Number Street			
	sole pro	ave more than one oprietorship, use a e sheet and attach it etition.			City Check the appropriate box to describe your business. Health Care Business (as defined in 11 U.S.C. § Single Asset Real Estate (as defined in 11 U.S.C. § 101(53A) Commodity Broker (as defined in 11 U.S.C. § 100 None of the above	§ 101(27A)) C. § 101(51B))	ZIP Cod	de
13.	Chapte Bankru are you debtor defined § 1182(For a de busines	r filing under r 11 of the ptcy Code, and a small business or a debtor as by 11 U.S.C. 1)? efinition of small s debtor, see C. § 101(51D).	cho are mos	osing to a small strecer any of No. No. Yes.	filing under Chapter 11, the court must know whether y to proceed under Subchapter V so that it can set appropil business debtor or you are choosing to proceed under to balance sheet, statement of operations, cash-flow stateme	priate deadline or Subchapter atement, and 11 U.S.C. § 1 usiness debtor det Subchapte to the definition	es. If you V, you mu federal ind 116(1)(B) according to the der V of Chon in § 11:	indicate that you ast attach your come tax return . g to the definition in efinition in the apter 11. 82(1) of the
Pa	art 4:	Report If You Ow	n o	r Hav	e Any Hazardous Property or Any Propert	·		
	Do you propert alleged immine hazard	own or have any y that poses or is to pose a threat of nt and identifiable to public health or Or do you own		No Yes.	What is the hazard?	,		
	For examperishan	mple, do you own ble goods, or k that must be fed, or			If immediate attention is needed, why is it needed? Where is the property? Number Street			
	a bullali repairs?	ng that needs urgent			City		State	ZIP Code

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Debtor 1 Ashleigh Anne Nordstrom Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counselin	g because of:
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me
	incapable of realizing or making
	rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am	not	requir	red to	rece	eive	a br	iefing	about
		unsel						

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Ashleigh Anne Nor		dstrom				Case number (if	Case number (if known)		
P	art 6:	Answer These C	Quest	ions for	Reporting P	urpos	ses		
16.	What ki have?	nd of debts do you	16a	as "inci	-	idual pr	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b 16c	money No	for a business on c. Go to line 16c es. Go to line 17	r invest	iness debts? Business debt ment or through the operation the that are not consumer or bus	of the	
17.	Are you Chapte	ı filing under r 7?		No. I a	am not filing unde	er Chap	oter 7. Go to line 18.		
	any exe	estimate that after empt property is ed and strative expenses	$\overline{\checkmark}$		dministrative expe	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
	availab	d that funds will be le for distribution cured creditors?] Yes				
18.		any creditors do imate that you		1-49 50-99 100-199 200-999			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to h?		\$100,001	900 \$100,000 1-\$500,000 1-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you e your liabilities to		\$100,001	000 \$100,000 1-\$500,000 1-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Ashleigh Anne No	rdstrom	Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and and correct.	I I declare under penalty	of perjury that the information provided is true		
			•	may proceed, if eligible, under Chapter 7, 11, 12, ief available under each chapter, and I choose to		
		If no attorney represents me and fill out this document, I have obta		pay someone who is not an attorney to help me required by 11 U.S.C. § 342(b).		
		I request relief in accordance with	the chapter of title 11, l	United States Code, specified in this petition.		
		G	e can result in fines up t	rty, or obtaining money or property by fraud in o \$250,000, or imprisonment for up to 20 years,		
		X /s/ Ashleigh Anne Nordst		x		
		Ashleigh Anne Nordstrom, De	btor 1	Signature of Debtor 2		
		Executed on 05/14/2024 MM / DD / YYYY	_	Executed on		

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Debtor 1 Ashleigh Anne No	ordstrom	Case number (if know	n)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in eligibility to proceed under Chapter 7, 11 relief available under each chapter for w	, 12, or 13 of title 11, United Sta	ites Code, and have explained the
If you are not represented by an attorney, you do not need to file this page.	the debtor(s) the notice required by 11 U certify that I have no knowledge after an is incorrect.		
	X /s/ Thomas A. Blake Signature of Attorney for Debtor	Date	05/14/2024 MM / DD / YYYY
	Thomas A. Blake		
	Printed name Thomas A. Blake Law Firm		
	Firm Name 505 W. 9th St., Ste. 202		
	Number Street		
	Sioux Falls	SD	57104
	City	State	ZIP Code

33 Bar number

Contact phone (605) 336-1216 Email address legaladvice@tblakelaw.com

SD State Case: 24-40155 Document: 1 Filed: 05/14/24 Page 9 of 64

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Fill in this inf	ormation to i	dentify your case	:
Debtor 1	Ashleigh First Name	Anne Middle Name	Nordstrom Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	r the: DISTRICT OF	SOUTH DAKOTA
Case number (if known)			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$11,260.32
	1c. Copy line 63, Total of all property on Schedule A/B	\$11,260.32
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$7,226.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$82,261.00
	Your total liabilities	\$89,487.00
	art 3: Summarize Your Income and Expenses	
l.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,285.65
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$4,281.67

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Del	btor 1	Ashleigh Anne Nordstrom	Case number (if known)	
Р	art 4:	Answer These Questions for Administrative and S	Statistical Records	
6.	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?		
	□ No ✓ Ye	 You have nothing to report on this part of the form. Check this bo 	ox and submit this form to the court with your other so	chedules.
7.	What k	ind of debt do you have?		
	بخا	our debts are primarily consumer debts. Consumer debts are tho mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g		,
		our debts are not primarily consumer debts. You have nothing to is form to the court with your other schedules.	report on this part of the form. Check this box and s	submit
8.		he Statement of Your Current Monthly Income: Copy your total conform 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L	•	\$5,235.43
9.	Copy t	he following special categories of claims from Part 4, line 6 of S	ichedule E/F:	

Total claim

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$7,226.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$13,227.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$20,453.00

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Fill in this inf Debtor 1	Ashleigh	dentify your case Anne	Nordstrom		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	r the: DISTRICT OF	SOUTH DAKOTA		
Case number				☐ Chook	if this is an
(if known)			_	_	if this is an led filing
Official Form		y			12/15
the asset in the ca filing together, bo sheet to this form	ategory where youth are equally re i. On the top of a	ou think it fits best. I sponsible for supply any additional pages,	ist an asset only once. If an ass Be as complete and accurate as ing correct information. If more write your name and case num ng, Land, or Other Real Es	possible. If two married pe space is needed, attach a ber (if known). Answer eve	eople are separate ry question.
✓ No. Go	to Part 2.	ty?	t in any residence, building, lan of your entries from Part 1, incl		***
entries for pa	ages you have at	tached for Part 1. W	rite that number here	→	\$0.00
Part 2: De	scribe Your V	ehicles			
-		•	n any vehicles, whether they are also report it on Schedule G: Exe	_	-
3. Cars, vans, t	rucks, tractors, s	sport utility vehicles,	motorcycles		
□ No ☑ Yes					
3.1. Make:	Homemad		an interest in the property?	Do not deduct secured clai amount of any secured clai	ims on Schedule D:
Model:	Motorcycle		or 1 only	Creditors Who Have Claim	
Year:	2013		or 2 only or 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate milea	ige:	_	ast one of the debtors and another	\$4,000.00	\$4,000.00
Other information:	o Motorovola (mada 🖵 Char	k if this is community property		
2013 Homemad from various pa not been runnin	rts, no odomet	_	ck if this is community property instructions)		

VIN: SD14427MC13

Deb	tor 1	Ashleigh An	ne Nordstrom	Case number (if known)
4.		es: Boats, trail	notor homes, ATVs and other recreational vehicles, othe ers, motors, personal watercraft, fishing vessels, snowmobil	
5.			of the portion you own for all of your entries from Part 2, have attached for Part 2. Write that number here	
Pa	art 3:	Describe `	Your Personal and Household Items	
Do	you own	or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and es: Major appli	d furnishings iances, furniture, linens, china, kitchenware	
		. Describe	See continuation page(s).	\$935.00
7.	Electro Example	es: Televisions	s and radios; audio, video, stereo, and digital equipment; co ections; electronic devices including cell phones, cameras, r	·
	☐ No ☑ Yes	. Describe	See continuation page(s).	\$320.00
8.		•	nd figurines; paintings, prints, or other artwork; books, pictur n, or baseball card collections; other collections, memorabili	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Describe		
9.			and hobbies otographic, exercise, and other hobby equipment; bicycles, p d kayaks; carpentry tools; musical instruments	pool tables, golf clubs, skis;
	✓ No ☐ Yes	. Describe		
10.	,		es, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes	. Describe		
11.	•		clothes, furs, leather coats, designer wear, shoes, accessori	es
	☐ No ✓ Yes	. Describe	Clothing	\$1,500.00
12.			ewelry, costume jewelry, engagement rings, wedding rings, l	heirloom jewelry, watches, gems,
	☐ No ✓ Yes	. Describe	Jewelry	\$50.00

Deb	tor 1	Ashleigh Anne Nordstro	om	Case number (if known)	
13.		m animals es: Dogs, cats, birds, horses	s		
	✓ No ☐ Yes	. Describe]
14.	Any oth		d items you did not already list, includi	ing any health aids you	_
		. Give specific rmation]
15.			entries from Part 3, including any entri		\$2,805.00
P	art 4:	Describe Your Finar	ncial Assets		
Do	you own	or have any legal or equita	able interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in your petition	wallet, in your home, in a safe deposit bo	ox, and on hand when you file your	
	☐ No ✓ Yes	·		Cash:	\$20.00
17.	-		ther financial accounts; certificates of depother similar institutions. If you have mult		
	□ No ☑ Yes		Institution name:		
	17	1. Checking account:	Checking account - Wells Fargo		\$54.37
	17	2. Other financial accoun	t: Cash App Debit Card		\$0.48
18.		mutual funds, or publicly tes: Bond funds, investment	traded stocks accounts with brokerage firms, money m	arket accounts	
	✓ No ☐ Yes	Institutio	on or issuer name:		
19.		blicly traded stock and interest in an LLC, partnership	erests in incorporated and unincorpora o, and joint venture	ated businesses, including	
		. Give specific rmation about			
			of entity:	% of ownership:	

Deb	tor 1	Ashleigh Anne	Nordstrom	Case number (if kno	wn)	
20.	Negotia Non-neg No No No Yes info	able instruments inc	clude personal checks	negotiable and non-negotiable instruments, cashiers' checks, promissory notes, and money orders at transfer to someone by signing or delivering them.		
21.		nent or pension ac les: Interests in IR/ profit-sharing p	A, ERISA, Keogh, 401	(k), 403(b), thrift savings accounts, or other pension or		
	ب	s. List each count separately.	Type of account:	Institution name:		
			401(k) or similar plan	403(b) w/employer Avera (ERISA Qualified)	\$1,035.32	2
22.	Your sh Exampl		deposits you have mad	e so that you may continue service or use from a compa ent, public utilities (electric, gas, water), telecommunica		_
	□ No ✓ Yes	5	lı	stitution name or individual:		
				ecurity deposit on rental unit	\$1,675.00	0
23.	☑ No		a specific periodic pa	ment of money to you, either for life or for a number of y	vears)	_
24.			n IRA, in an account i 29A(b), and 529(b)(1).	n a qualified ABLE program, or under a qualified stat	e tuition program.	
	✓ No	S	Institution name and	description. Separately file the records of any interests	. 11 U.S.C. § 521(c)	
25.		equitable or futur exercisable for y		ty (other than anything listed in line 1), and rights or		
	✓ No	s. Give specific ormation about ther				_
26.				s, and other intellectual property; oceeds from royalties and licensing agreements		
	_	s. Give specific ormation about ther	m			_
27.	Exampl		d other general intanits, exclusive licenses,	gibles cooperative association holdings, liquor licenses, profe	ssional licenses	
		s. Give specific ormation about ther	m			_

Deb	tor 1 Ashleigh Anne Nordst	rom	Case number (if known))
Mor	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years	(see line 30). Amt: \$0.00	4 Income Tax refund	Federal: \$0.00 State: \$0.00 Local: \$0.00
29.	Family support Examples: Past due or lump sum a	alimony, spousal support, child support, ma	aintenance, divorce settlement	i, property settlement
	✓ No✓ Yes. Give specific information		Alimony:	
			Maintenar	ice:
			Support:	
			Divorce se	ettlement:
			Property s	ettlement:
	No✓ Yes. Give specific information	(1) Earned but unpaid wages, (2) a pro-rata share of the 2024 Income exemption of \$7,000. (Debtor owed for 2023 tax year)		
		(Bostor ewed for 2020 tax year)		
31.	No Yes. Name the insurance company of each policy and list its value	e insurance; health savings account (HSA) Company name: Ferm Life Insurance w/employer (no ash value)	credit, homeowner's, or rente Beneficiary:	s's insurance Surrender or refund value:
32.	If you are the beneficiary of a living entitled to receive property because	ue you from someone who has died g trust, expect proceeds from a life insurance e someone has died	ce policy, or are currently	
	✓ No Yes. Give specific information			
33.		ether or not you have filed a lawsuit or met disputes, insurance claims, or rights to su		

Deb	tor 1	Ashleigh Anne Nord	Istrom Case number (if known)	
34.	rights to No	ontingent and unliquid set off claims Describe each claim	lated claims of every nature, including counterclaims of the debtor and	
35.	Any fina	ncial assets you did n	not already list	
	✓ No ☐ Yes.	Give specific informat	ion	
36.			our entries from Part 4, including any entries for pages you have number here	\$4,455.32
Pa	art 5:	escribe Any Busi	ness-Related Property You Own or Have an Interest In. List ar	ny real estate in Part 1.
37.	Do you o	own or have any legal	or equitable interest in any business-related property?	
		Go to Part 6. Go to line 38.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.		s receivable or comm	issions you already earned	
	✓ No ☐ Yes.	Describe		
39.		quipment, furnishings s: Business-related co desks, chairs, electr	mputers, software, modems, printers, copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes.	Describe]
40.	Machine	ry, fixtures, equipmer	nt, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes.	Describe		
41.	Inventor	у		
	▼ No □ Yes.	Describe		
42.	Interests	in partnerships or jo	int ventures	
	✓ No ☐ Yes.	Describe Name of	f entity: % of ownership:	
43.	Custome	er lists, mailing lists, o	or other compilations	
	✓ No ☐ Yes.	Do your lists include	personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
		Yes. Describe		

44. Any business-related property you did not already list No	Deb	tor 1 Ashleigh Anne Nordstrom Case number (if known)	
Yes. Give specific information. 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	44.	Any business-related property you did not already list	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Examples: Livestock, poultry, farm-raised fish No Yes No Yes. Give specific information			
If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.	45.		\$0.00
No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No Yes 48. Crops-either growing or harvested No Yes. Give specific information	Pa		n Interest In.
Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No	46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
### Parm animals ### Farm animals ### Examples: Livestock, poultry, farm-raised fish ### No ### Yes ### Yes ### 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ### No ### Yes ### Yes ### 19. Farm and fishing supplies, chemicals, and feed ### No ### Yes ### 50. Farm and commercial fishing-related property you did not already list ### No ### Yes ### Solve specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### No ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### Yes. Give specific ### Indianal fishing supplies in the property you did not already list ### Indianal fishing supplies in the property you did not already list ### Indianal fishing supplies in the property you did not already list ### Indianal fishing supplies in the p			
Examples: Livestock, poultry, farm-raised fish No Yes 48. Crops—either growing or harvested No Yes. Give specific information			portion you own? Do not deduct secured
Yes 48. Crops-either growing or harvested No	47.		
48. Crops-either growing or harvested No			1
✓ No Yes. Give specific information		The same of the sa	
Yes. Give specific information	48.	Cropseither growing or harvested	
No Yes 50. Farm and fishing supplies, chemicals, and feed No Yes 51. Any farm- and commercial fishing-related property you did not already list No Yes. Give specific information		Yes. Give specific]
Solution Yes Solution Yes Solution Yes Solution Yes Solution Yes Solution Yes. Give specific information	49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
No Yes 51. Any farm- and commercial fishing-related property you did not already list No Yes. Give specific information			
The second of	50.	Farm and fishing supplies, chemicals, and feed	•
51. Any farm- and commercial fishing-related property you did not already list No			1
No Yes. Give specific information		☐ Yes	
Yes. Give specific information	51.	Any farm- and commercial fishing-related property you did not already list	
- 1		Yes. Give specific	
	52.	<u> </u>	\$0.00

Deb	tor 1	Ashleigh Anne Nordstrom	Case nu	umber (if known)		
P	art 7:	Describe All Property You Own or Have an In	terest in That You [Did Not List Abo	ve	
53.	-	have other property of any kind you did not already list es: Season tickets, country club membership	?			
	✓ No	s. Give specific information.				
54.	Add the	e dollar value of all of your entries from Part 7. Write tha	t number here		-	\$0.00
Pa	art 8:	List the Totals of Each Part of this Form				
55.	Part 1:	Total real estate, line 2			>	\$0.00
56.	Part 2:	Total vehicles, line 5	\$4,000.00			
57.	Part 3:	Total personal and household items, line 15	\$2,805.00			
58.	Part 4:	Total financial assets, line 36	\$4,455.32			
59.	Part 5:	Total business-related property, line 45	\$0.00			
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7:	Total other property not listed, line 54	\$0.00			
62.	Total p	ersonal property. Add lines 56 through 61	\$11,260.32	Copy personal property total	+	\$11,260.32
63.	Total of	f all property on Schedule A/B. Add line 55 + line 62				\$11,260.32

Deb	tor 1 Ashleigh Anne Nordstrom	Case number (if known)	
6.	Household goods and furnishings (details):		
	Couches		\$200.00
	Bed		\$50.00
	Desk		\$25.00
	Pots & Pans		\$25.00
	Bed		\$75.00
	Dresser		\$25.00
	Coffee Table		\$10.00
	Misc.		\$100.00
	Knick Knacks		\$25.00
	Dishes/utensils		\$20.00
	Dresser		\$25.00
	Nightstand		\$20.00
	Lamps (2)		\$5.00
	Pictures/home decor		\$50.00
	Loveseat		\$20.00
	Tools		\$10.00
	Stand		\$75.00
	Small appliances		\$35.00
	Gas grill		\$20.00
	Patio furniture		\$50.00
	Stand		\$10.00
	Vacuum		\$25.00
	Bar stools (2)		\$30.00
	Fake plant		\$5.00
7.	Electronics (details):		
	TVs (2)		\$100.00
	Cell Phones (2)		\$150.00
	TV		\$50.00
	Alexa		\$20.00

The MKOTA Check if this is an amended filing mpt Interpret the property that you claim as exempt. The property that you claim the full fair market value of the property being the exemptions—such as those for health aids, rights to	If more
Check if this is an amended filing mpt mg together, both are equally responsible for supplying correct inform 106A/B) as your source, list the property that you claim as exempt. art 2: Additional Page as necessary. On the top of any additional page are amount of the exemption you claim. One way of doing so may claim the full fair market value of the property being	mation. If more
Check if this is an amended filing mpt mg together, both are equally responsible for supplying correct inform 106A/B) as your source, list the property that you claim as exempt. art 2: Additional Page as necessary. On the top of any additional page are amount of the exemption you claim. One way of doing so may claim the full fair market value of the property being	mation. If more
amended filing amended filing mpt mg together, both are equally responsible for supplying correct inform 106A/B) as your source, list the property that you claim as exempt. art 2: Additional Page as necessary. On the top of any additional page amount of the exemption you claim. One way of doing so may claim the full fair market value of the property being	mation. If more
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106A/B) as your source, list the property that you claim as exempt. art 2: Additional Page as necessary. On the top of any additional p the amount of the exemption you claim. One way of doing so hay claim the full fair market value of the property being	If more
nay claim the full fair market value of the property being	
unlimited in dollar amount. However, if you claim an exemption to a particular dollar amount and the value of the uld be limited to the applicable statutory amount.	
lv. even if vour spouse is filing with vou.	
s. 11 U.S.C. § 522(b)(3)	
· · · · ·	
xempt, fill in the information below.	
Amount of the Specific laws that allow exemption you claim	on
om Check only one box for each exemption	
\$\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	
☑ \$200.00 SDCL § 43-45-4	
/j	y, even if your spouse is filing with you. s. 11 U.S.C. § 522(b)(3) cempt, fill in the information below. Amount of the Specific laws that allow exemption you claim om Check only one box for each exemption The standard of the Specific laws that allow exemption Market value, up to any applicable statutory

Asnieign Anne Nordstrom		Case numbe	r (if known)
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Bed	\$50.00	\$50.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Desk	\$25.00	\$25.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Pots & Pans	\$25.00	\$25.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description:	\$75.00	\$75.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Dresser	\$25.00	\$25.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Coffee Table	\$10.00	\$10.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Misc.	\$100.00	\$100.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Knick Knacks	\$25.00	\$25.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Dishes/utensils	\$20.00	\$20.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	

Debtor 1	Ashleigh Anne Nordstrom	Case number (if known)				
Part 2:	Additional Page					
	iption of the property and line on NB that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B		eck only one box for h exemption		
Brief descrip Dresser Line from Se	ption: chedule A/B: 6	\$25.00		\$25.00 100% of fair market value, up to any applicable statutory	SDCL § 43-45-4	
Brief descrip Nightstand Line from So		\$20.00		\$20.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	
Brief descrip Lamps (2)		\$5.00		\$5.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	
	ption: nome decor chedule A/B:6	\$50.00		\$50.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	
Brief descrip Loveseat Line from Se	ption: chedule A/B:6	\$20.00		\$20.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	
Brief descrip Tools Line from S	ption: chedule A/B: 6	\$10.00		\$10.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	
Brief descrip Stand Line from Se	ption: chedule A/B:6	\$75.00		\$75.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	
Brief descrip Small app Line from S	•	\$35.00		\$35.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	
Brief descrip Gas grill Line from S	ption: chedule A/B:6	\$20.00		\$20.00 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4	

Asnieign Anne Nordstrom		Case numbe	r (if known)
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Patio furniture	\$50.00	\$50.00	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Stand	\$10.00	\$10.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description:	\$25.00	\$25.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Bar stools (2)	\$30.00	\$30.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: Fake plant	\$5.00	\$5.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description:	\$100.00	\$100.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B: 7		value, up to any applicable statutory limit	
Brief description: Cell Phones (2)	\$150.00	\$150.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B: 7		value, up to any applicable statutory limit	
Brief description:	\$50.00	\$50.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B: 7		value, up to any applicable statutory limit	
Brief description: Alexa	\$20.00	\$20.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B: 7		value, up to any applicable statutory limit	

Debtor 1 Ashleigh Anne Nordstrom Case number (if known)				
Part 2: Additional Page				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		ck only one box for h exemption	
Brief description: Clothing	\$1,500.00		\$1,500.00 100% of fair market	SDCL § 43-45-2(1-3), (5,6)
Line from Schedule A/B:11			value, up to any applicable statutory limit	
Brief description: Jewelry	\$50.00		\$50.00 100% of fair market	SDCL § 43-45-2(1-3), (5,6)
Line from Schedule A/B:12			value, up to any applicable statutory limit	
Brief description: Cash on Hand	\$20.00	<u> </u>	\$20.00 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:16		_	value, up to any applicable statutory limit	
Brief description: Checking account - Wells Fargo	\$54.37		\$54.37 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:17.1			value, up to any applicable statutory limit	
Brief description: Cash App Debit Card	\$0.48		\$0.48 100% of fair market	SDCL § 43-45-4
Line from Schedule A/B:17.2		Ц	value, up to any applicable statutory limit	
Brief description: 403(b) w/employer Avera (ERISA Qualified)	\$1,035.32	Ø	\$1,035.32 100% of fair market	11 U.S.C. § 522(n)
Line from Schedule A/B: 21			value, up to any applicable statutory limit	
Brief description: (1) Earned but unpaid wages, (2) accrued vacation time, and (3) pro-rata share of the 2024 Income Tax refund up to the allowed exemption of \$7,000.	\$1,670.15		\$1,670.15 100% of fair market value, up to any applicable statutory limit	SDCL § 43-45-4
(Debtor owed for 2023 tax year) Line from Schedule A/B:30				

05/14/2024 11:17:31am

UNITED STATES BANKRUPTCY COURT DISTRICT OF SOUTH DAKOTA SOUTHERN DIVISION (SIOUX FALLS)

IN RE: Ashleigh Anne Nordstrom CASE NO

CHAPTER 7

TOTALS BY EXEMPTION LAW

Exemption Law	Husband	Wife	Joint	Community	N/A	Exemption Total	Market Value Total
11 U.S.C. § 522(n)	\$0.00	\$0.00	\$0.00	\$0.00	\$1,035.32	\$1,035.32	\$1,035.32
SDCL § 43-45-2(1-3), (5,6)	\$0.00	\$0.00	\$0.00	\$0.00	\$1,550.00	\$1,550.00	\$1,550.00
SDCL § 43-45-4	\$0.00	\$0.00	\$0.00	\$0.00	\$7,000.00	\$7,000.00	\$7,000.00

Fill in this	information to i	dentify your case	:			
Debtor 1	Ashleigh	Anne	Nordstrom			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if fili	ng) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for	r the: DISTRICT OF	SOUTH DAKOTA			
Case number	·				☐ Check if this i	e an
(if known)					amended filin	
Official Fo	rm 106D					
Schedule	D: Creditors	Who Have Cla	ims Secured b	y Property		12/15
correct inform. On the top of a 1. Do any cre No. (ation. If more space any additional pages editors have claims	e is needed, copy the s, write your name an secured by your pro ubmit this form to the conation below.	Additional Page, fill in dispersion of the dispe	t out, number the entr wn).	Ily responsible for supries, and attach it to the thing else to report on the	is form.
rait i.	LIST All Secured	Ciaiiiis				
claim, list t creditor ha	the creditor separatel as a particular claim, l cossible, list the claim	reditor has more than or y for each claim. If mo- list the other creditors is in alphabetical order	ore than one in Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	property that claim:			
Creditor's name						
Number Street						
Debtor 1 or Debtor 2 or Debtor 1 ar At least one	•	Continge Unliquida Disputed Nature of lie An agree Statutory Judgmen	ated	v. as mortgage or secured nechanic's lien)		
to a comm						
Date debt was	incurred	Last 4 digits	of account number			
Add the dollar that number he	-	s in Column A on thi	s page. Write	\$0.00		

Official Form 106D

all pages. Write that number here:

If this is the last page of your form, add the dollar value totals from

\$0.00

Deb Deb (Spo	in this inf						
Deb (Spo		ormation to id	dentify your c	ase:			
(Spo	otor 1	Ashleigh	Anne	Nordstrom			
(Spo		First Name	Middle Name	Last Name			
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name			
Unit	ted States Ba	nkruptcy Court for	the: DISTRICT	OF SOUTH DAKOTA			
	e number nown)					Check if this is a amended filing	n
Offi	cial Form	106E/F					
Sch	nedule E	F: Creditor	s Who Hav	e Unsecured Claims			12/15
If mo	re space is n s page. On t	needed, copy the the top of any add	Part you need, fi ditional pages, w	I claims that are listed in Schedule ill it out, number the entries in the rite your name and case number secured Claims	boxes on the left. At		
1. [Do any credi	tors have priority	unsecured clair	ms against you?			
2. I G S r	claim. For ea show both prid more space is	ur priority unsect ich claim listed, ide ority and nonpriori	entify what type o ty amounts. As n ty unsecured clair	creditor has more than one priority uf claim it is. If a claim has both prior nuch as possible, list the claims in a ms, fill out the Continuation Page of	rity and nonpriority amo	ounts, list that clair rding to the credito	n here and or's name. If
	•			e instructions for this form in the inst	truction booklet		
(тог ап ехріаі	nation of each type	e or claim, see th		Total claim	Priority amount	Nonpriority amount
2.1					\$946.00	\$946.00	\$0.00
RS	/ Creditor's Nam			- Last 4 digits of account number			
<u>-</u>	Box 804527	ie		When was the debt incurred?			
LO F	er Street			- As of the date you file, the claim ☐ Contingent		- lly.	
		ОН	45280-4527	Unliquidated			
Numbe	innati						
Cinc City	innati	State	ZIP Code	- Disputed			

Debtor 1 Ashleigh Anne Nordstrom	Case number	er (if known)		
Part 1: Your PRIORITY Unsecured C	Claims Continuation Page			
After listing any entries on this page, number the previous page.	m sequentially from the Total		riority nount	Nonpriority amount
2.2 IRS		3,638.00	\$3,638.00	\$0.00
Priority Creditor's Name	Last 4 digits of account number	· 		
PO Box 804527 Number Street	_ When was the debt incurred? 2022			
	As of the date you file, the claim is: Check:	all that apply.		
	_ Contingent			
Cincinnati OH 45280-4527	☐ Unliquidated — ☐ Disputed			
City State ZIP Code				
Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim: Domestic support obligations			
Debtor 2 only	Taxes and certain other debts you owe the	e government		
Debtor 1 and Debtor 2 only	Claims for death or personal injury while y	•		
At least one of the debtors and another Check if this claim is for a community debt	intoxicated			
Is the claim subject to offset?	Other. Specify			
No				
Yes				
2.3	•	0.040.00	* 0.040.00	***
		2,642.00	\$2,642.00	\$0.00
IRS Priority Creditor's Name	Last 4 digits of account number			
PO Box 804527	When was the debt incurred? 2023			
Number Street				
	 As of the date you file, the claim is: Check: Contingent 	all that apply.		
Cincinnati OH 45200 4527	Unliquidated			
Cincinnati OH 45280-4527 City State ZIP Code	_ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only	☐ Domestic support obligations			
Debtor 2 only Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the	· ·		
At least one of the debtors and another	Claims for death or personal injury while y intoxicated	/ou were		
Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
No Yes				
☐ Yes				

Debtor 1	Ashleigh Anne Nordstrom	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
4.1 Accounts Nonpriority Cre PO Box 18	of your nonpriority unsecured claims of your nonpriority unsecured claims did not have more than one nonpriority unsecutaim it is. Do not list claims already included in the space is needed for nonpriority under the space is needed for nonp	Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. Sourced claim, list the creditor separately for each claim. For each claim listed buded in Part 1. If more than one creditor holds a particular claim, list the other insecured claims, fill out the Continuation Page of Part 2. Last 4 digits of account number 0 9 0 1 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	•
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check i	State ZIP Code ed the debt? Check one. only	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Lincoln County Judgment	
San Franci City Who incurre Debtor 1 Debtor 1 Debtor 1 At least Check i	ditor's Name rnia St. FI 12 Street CA 94108 State ZIP Code ed the debt? Check one.	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Personal Loan	\$600.00

Debtor 1 Ashleigh Anne Nordstrom	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$95.00
Amazon Corporate Headquarters	Last 4 digits of account number 5 9 3 2	·
Nonpriority Creditor's Name 440 Terry Ave N	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	□ Disputed	
Seattle WA 98109 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
✓ No Yes		
4.4		\$11,562.00
Capital One Nonpriority Creditor's Name	Last 4 digits of account number9814_	
Attn: Bankruptcy Dept.	When was the debt incurred?	
Number Street PO Box 30285	As of the date you file, the claim is: Check all that apply.	
1 0 Box 00200		
Call lake Oite. LIT 04420 0005	Disputed	
Salt Lake City UT 84130-0285 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No Yes		
4.5		\$1,083.00
Celtic Bank Nonpriority Creditor's Name	Last 4 digits of account number4099_ When was the debt incurred?	
268 S. State St. Ste. 300	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Salt Lake City UT 84111	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☐ Yes		

Debtor 1	Ashleigh Anne Nordstrom	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing	g any entries on this page, number the age.	m sequentially from the	Total claim
4.6			\$527.00
Nonpriority Cr Attn: Ban	kruptcy Dept. Street	Last 4 digits of account number 2 8 2 3 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	
		Unliquidated	
Columbus		─	
City Who incurr	State ZIP Code ed the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor Debtor Debtor At least Check	1 only	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card 	
4.7			\$8,679.00
	nt of Education Loan Services	Last 4 digits of account number 6 4 5 9	
Nonpriority Cr	editor's Name 335	When was the debt incurred?	
	Street	As of the date you file, the claim is: Check all that apply. Contingent Uniquidated	
Wilkes-Ba	rre PA 18773	Disputed	
Debtor Debtor Debtor At least Check Is the claim No		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Yes			

Debtor 1 Ashleigh Anne Nordstrom	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.8		\$15,537.00
Discover Financial Services, LLC	Last 4 digits of account number 0 3 9 6	
Nonpriority Creditor's Name PO Box 3025	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
New Albany OH 43054-3025		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Pending Lincom County Judgment	
✓ No		
Yes		
6011-2088-2503-5317		
4.9		\$51.00
First Interstate Bank	Last 4 digits of account number 6 9 2 2	
Nonpriority Creditor's Name PO Box 241826	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Omaha NE 68124		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Bank Fees	
Is the claim subject to offset?	Dalik i ees	
No No		
☐ Yes		

Debtor 1 Ashleigh Anne Nordstrom	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.10		\$602.00
First National Bank of Omaha	Last 4 digits of account number 8 6 8 7	·
Nonpriority Creditor's Name 1620 Dodge Street	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Stop Code 3113	_	
	— ☐ Disputed	
Omaha NE 68102-1593 City State ZIP Code	Turns of NONDRIORITY was a sured alsies.	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	oroan cara	
✓ No ☐ Yes		
4.11		\$6,480.00
IRS	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 804527	When was the debt incurred? 2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Cincinnati OH 45280-4527		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	1040 Taxes	
✓ No ☐ Yes		
4.12		\$2,858.00
Max Lend	Last 4 digits of account number 2 7 0 5	,
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 639 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	□ Unliquidated □ □ Disputed	
Parshall ND 58770-0639		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Personal Loan	
Is the claim subject to offset? No		
☐ Yes		

Debtor 1 Ashleigh Anne Nordstrom	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.13		\$317.00
Midcontinent Communications	Last 4 digits of account number 4 1 0 4	
Nonpriority Creditor's Name PO Box 5010	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
0: 5 !! 00 57447 5040	Disputed	
Sioux Falls SD 57117-5010 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Services	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.14		\$14,516.00
Nordstrom Card Services	Last 4 digits of account number2304_	
Nonpriority Creditor's Name PO Box 100135	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	— ☐ Disputed	
Columbia SC 29202-3135 City State ZIP Code	Ture of NONDRIORITY was a sured alaim.	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.15		\$2,190.00
Progressive Northern Insurance Co.	Last 4 digits of account number 1 8 1 4	
Nonpriority Creditor's Name PO Box 55126	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Boston MA 02205-5126 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Insurance Services	
Is the claim subject to offset?		
☑ No		
☐ Yes		

Debtor 1 Ashleigh Anne Nordstrom	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.16		Unknown
Sanford Health	Last 4 digits of account number	
Nonpriority Creditor's Name Attn: Charlotte Rusch	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
801 Broadway N, Route 1000	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Fargo ND 58122-0001		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Expense	
Is the claim subject to offset?		
☑ No		
Yes		
4.17		Unknown
Surge	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 8099 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Newark DE 19714-8099	Disputed	
Newark DE 19714-8099 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Credit Gard	
No No		
Yes		
4.18		
	Look 4 dinite of account numbers F F Q A	\$6,479.00
Synchrony Bank/Care Credit Nonpriority Creditor's Name	_ Last 4 digits of account number _ 5 _ 5 _ 3 _ 1	
Attn: Bankruptcy Dept.	When was the debt incurred?	
Number Street PO Box 965064	As of the date you file, the claim is: Check all that apply.	
	_	
Outputs	Disputed	
Orlando FL 32896-5064 City State ZIP Code	Type of NONDDIODITY upgeoured claims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 Ashleigh Anne Nordstrom	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.19		\$5,712.00
TD Bank, NA	Last 4 digits of account number 2 3 0 4	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 84037 Number Street	As of the date you file, the claim is: Check all that apply.	
Trumbol Calot	Contingent	
	Unliquidated	
Columbus GA 31908-4037	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
✓ No ☐ Yes		
4.20		\$4,548.00
Zuntafi	Last 4 digits of account number 7 5 1 1	<u> </u>
Nonpriority Creditor's Name PO Box 4501	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Aberdeen SD 57401-4501	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	••	
Debtor 1 only	✓ Student loans ✓ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No ☐ Yes		
Yes		

Debtor 1	Ashleigh Ann	ne Nord	lstrom		Case	e number (if known)
Part 3:	List Others	s to Be	Notified Abou	ut a Debt That You Already	/ Lis	sted
For ex credite debts	ample, if a colled or in Parts 1 or 2 that you listed ir	ction ag , then li n Parts	gency is trying to st the collection a	collect from you for a debt you on agency here. Similarly, if you ha litional creditors here. If you do	owe t	bt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
AFNI				On which entry in Part 1 or P	art 2	2 did you list the original creditor?
PO Box 3	517			Line 4.15 of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street			<u> </u>	\square	Part 2: Creditors with Nonpriority Unsecured Claims
Blooming	ton	IL	61702-3517	 Last 4 digits of account num 	ber	
City		State	ZIP Code	_		
Avante US	SA			On which entry in Part 1 or P	art 2	2 did you list the original creditor?
Name 3600 S. G	essner Rd., St	e 225		Line 4.12 of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street					Part 2: Creditors with Nonpriority Unsecured Claims
				_	_	
Houston		TX	77063	 Last 4 digits of account num 	ber	
City		State	ZIP Code	_		
Avera Hea	alth			On which entry in Part 1 or P	art 2	2 did you list the original creditor?
Name PO Box 50 Number				Lineof (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Sioux Fall	le	SD	57117-5045	— — Last 4 digits of account num	ber	
City		State	ZIP Code	_		
Client Ser	vices, Inc.			On which entry in Part 1 or P	art 2	2 did you list the original creditor?
Name	y S Truman Bl	vd		_		Part 1: Creditors with Priority Unsecured Claims
Number		vu.		en (eneckone).		Part 2: Creditors with Nonpriority Unsecured Claims
Ct. Charle			62204 4047	 Last 4 digits of account num 	ber	
St. Charle	:5	MO State	63301-4047 ZIP Code	_		
0 15				On which automic David on D	4	Add on the Battle and the Add on the Battle Add
Name	fessional, Inc.			_		2 did you list the original creditor?
PO Box 425 Number Street			Lineof (Check one):		Part 1: Creditors with Priority Unsecured Claims	
				_		Part 2: Creditors with Nonpriority Unsecured Claims
			44454	 Last 4 digits of account num 	ber	
Geneseo City		NY State	14454 ZIP Code	_		

Debtor 1	Ashleigh Anne	Nor	dstrom			Case	e number (if known)
Part 3:	List Others	to B	e Notified Abou	ıt a Debt That Yoւ	u Already	Lis	sted Continuation Page
	ofessional, Inc.			On which entry in	Part 1 or Pa	art 2	2 did you list the original creditor?
PO Box 4	25			Line 2.1 of (CI	heck one):	M	Part 1: Creditors with Priority Unsecured Claims
Number	Street			· _			Part 2: Creditors with Nonpriority Unsecured Claims
			44454	Last 4 digits of according to the contract of the contrac	count numb	er	
Geneseo City		NY State	14454 ZIP Code	_			
	inancial Service	s LL(:	On which entry in	Part 1 or Pa	art 2	2 did you list the original creditor?
PO Box 8	28			Line 4.5 of (CI	heck one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street				,	_	Part 2: Creditors with Nonpriority Unsecured Claims	
Skokio		IL	60076-0828	Last 4 digits of acc	count numb	er	
Skokie City		State	ZIP Code	_			
LVNV Fur	nding LLC			On which entry in	Part 1 or Pa	art 2	2 did you list the original creditor?
	Ogden St.			Line 4.10 _ of (CI	heck one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			_		$ \overline{\mathbf{V}} $	Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of acc	count numb	er	
Buffalo City		NY State	14206-2317 ZIP Code	_			
LVNV Fur	nding LLC			On which entry in	Part 1 or Pa	art 2	2 did you list the original creditor?
Name 698 1/2 S.	Ogden St.			— Line 4.5 of <i>(Cl</i>	heck one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street				,	_	Part 2: Creditors with Nonpriority Unsecured Claims
Puffolo		NIV.	44206 2247	Last 4 digits of acc	count numb	er	
Buffalo City		NY State	14206-2317 ZIP Code	_			
	t Capital Service	es		On which entry in	Part 1 or Pa	art 2	2 did you list the original creditor?
PO Box 5				Line 4.10 _ of <i>(Cl</i>	heck one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			_			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of according to the contract of the contract	count numb	er	
Livonia City		MI State	48151-6090 ZIP Code	_			
	t Capital Service	es		On which entry in	Part 1 or Pa	art 2	2 did you list the original creditor?
Name PO Box 5	10090			Line 4.5 of (Cl	heck one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street				,	_	Part 2: Creditors with Nonpriority Unsecured Claims
 Livonia		MI	48151-6090	Last 4 digits of according to the contract of the contrac	count numb	er	
City		State	ZIP Code	_			

Debtor 1	Ashleigh Anne N	lord	strom					Ca	ase	e number (if known)
Part 3:	List Others to	Ве	Notified Abou	ıt a De	bt Th	at \	You Alre	ady	Lis	sted Continuation Page
	g Law Firm			_ On w	/hich e	entry	in Part 1	or Pa	rt 2	2 did you list the original creditor?
Name PO Box 2427 Number Street					4.8	_of	(Check or		_	Part 1: Creditors with Priority Unsecured Claims
				_					✓	Part 2: Creditors with Nonpriority Unsecured Claims
Fargo ND 58108-2427				— Last 4 digits of account number						
Fargo City	Sta		58108-2427 ZIP Code	_						
	very Services, Inc	.		On which entry in Part 1 or Part 2 did you list the original creditor?						
	ell Mill Road			Line	4.3	_of	(Check or	ne):		Part 1: Creditors with Priority Unsecured Claims
Number S	Street			_					V	Part 2: Creditors with Nonpriority Unsecured Claims
				– Last	4 digit	s of	account n	numbe	er	
Marietta City	G/ Sta		30067 ZIP Code	_						
City	ال ال	110	ZII COUC							

Debtor 1	Ashleigh Anne Nordstrom	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom r art r	6b.	Taxes and certain other debts you owe the government	6b.	\$7,226.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. ⊣	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$7,226.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$13,227.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. 🖣	\$69,034.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$82,261.00

05/14/2024 11:17:33am

Fill in this inf	ormation to iden			
Debtor 1	Ashleigh First Name	Anne Middle Name	Nordstrom Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	UTH DAKOTA		
Case number (if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

05/14/2024 11:17:34am

				_	
Fill in this in	formation to i	dentify your case	:		
Debtor 1	Ashleigh	Anne	Nordstrom		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	\ Firet Name	Middle Name	Last Name		
(Spouse, it filling) Thethame	Middle Name	Lastivallie		
United States Ba	ankruptcy Court fo	or the: DISTRICT OF	SOUTH DAKOTA		
Case number				☐ Check if this is an	
(if known)				amended filing	
Official Form	106H				
Schedule H	: Your Cod	ebtors		12	2/15
	any codebtors?	• , •	int case, do not list either spou	own). Answer every question. use as a codebtor.)	
	•	•		ry? (Community property states and territories xas, Washington, and Wisconsin.)	
<u> </u>	to line 3.				
		rmer spouse, or legal e	quivalent live with you at the ti	me?	
∐ No					
person show creditor on s	vn in line 2 again Schedule D (Offic	as a codebtor only if	that person is a guarantor o dule E/F (Official Form 106E	tor if your spouse is filing with you. List the r cosigner. Make sure you have listed the /F), or <i>Schedule G</i> (Official Form 106G). Use	
Column 1	: Your codebtor			Column 2: The creditor to whom you owe the del	bt

Check all schedules that apply:

					1	
Fill in this inform	nation to identif	y your case:			ļ	
Debtor 1	Ashleigh First Name	Anne Middle Name	Nordstro Last Name	<u>m</u>	0.	als if also in .
Debtor 2					l	ck if this is:
(Spouse, if filing)	First Name	Middle Name	Last Name			An amended filing
	ruptcy Court for the:	DISTRICT O	F SOUTH DAKO	ΓΑ		A supplement showing postpetition chapter 13 income as of the following date
Case number (if known)				_		MM / DD / YYYY
Official Form 10)6I				_	WINT DD / TTTT
Schedule I: Yo						12/1
include information a about your spouse. I your name and case i	bout your spouse. f more space is nee	If you are separ ded, attach a se Answer every o	rated and your spo eparate sheet to th	use is not filing	with y	spouse is living with you, ou, do not include information any additional pages, write
Fill in your emploinformation.	oyment		Debtor 1			Debtor 2 or non-filing spouse
If you have more		vmont status				
job, attach a sepa with information a		yment status	✓ Employed☐ Not employed	ed		☐ Employed ☐ Not employed
additional employ	ers. Occup	ation				_
Include part-time, or self-employed		yer's name	Pulmonary & S	Sleep Consulta	nts	
Occupation may in student or homem applies.	Lilipio	yer's address	& Avera (P.T.) Number Street			Number Street
			City	State Zip C	ode	City State Zip Code
	How le	ong employed ti	here? <u>1 year/</u> 3	3 years		
Part 2: Give I	Details About Mo	onthly Incom	е			
				ing to report for ar	ny line	, write \$0 in the space. Include your
non-filing spouse unles						fan dhad manaan an dha limaa halann 16
f you or your non-filing ou need more space,			er, combine the info	ormation for all em	iployei	rs for that person on the lines below. If
				For Debtor	1	For Debtor 2 or non-filing spouse
	ss wages, salary, and solutions: S). If not paid monthles:			2. \$3,93	8.45	
B. Estimate and list	monthly overtime	oay.		3. +\$	0.00	
1. Calculate gross i	income. Add line 2	+ line 3.		4. \$3,93	8.45	

Debt	Debtor 1 Ashleigh Anne Nordstrom Case number (if knowr					n)				
				F	For Debtor 1		or Debto			
	Сор	y line 4 here	······	4.	\$3,938.45	_			_	
5.	List	all payroll ded	ductions:							
	5a.	Tax, Medicar	e, and Social Security deductions	5a.	\$640.85					
	5b.	Mandatory co	ontributions for retirement plans	5b.	\$0.00					
	5c.	Voluntary co	ntributions for retirement plans	5c.	\$0.00					
	5d.	Required rep	ayments of retirement fund loans	5d.	\$0.00					
	5e.	Insurance		5e.	\$0.00					
	5f.	Domestic sup	pport obligations	5f.	\$0.00					
	5g.	Union dues		5g.	\$0.00					
	5h.	Other deduct Specify: See	ions. e continuation sheet	5h. +	\$173.16					
6.	Add 5g +	the payroll de 5h.	eductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +	6.	\$814.01					
7.			onthly take-home pay. Subtract line 6 from line 4.	7.	\$3,124.44					
8.		Net income fr	me regularly received: rom rental property and from operating a ofession, or farm	8a.	\$0.00					
		gross receipts	ment for each property and business showing s, ordinary and necessary business expenses, and hly net income.							
	8b.	Interest and o	dividends	8b.	\$0.00					
	8c.		ort payments that you, a non-filing spouse, or a egularly receive	8c.	\$0.00					
			ny, spousal support, child support, maintenance, ment, and property settlement.							
	8d.	Unemployme	ent compensation	8d.	\$0.00					
	8e.	Social Securi	ity	8e.	\$0.00					
	8f.	Include cash a	ment assistance that you regularly receive assistance and the value (if known) or any nonce that you receive, such as food stamps or the Supplemental Nutrition Assistance Program) bisidies.							
		Specify:		8f.	\$0.00					
	8g.	Pension or re	etirement income	8g.	\$0.00					
	8h.	Other monthl	y income.							
		Specify: See	e continuation sheet	8h. +	<u>\$1,161.21</u>					
9.	Add	all other inco	me. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,161.21					
10.			r income. Add line 7 + line 9. ine 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,285.65	+			=[\$4,285.65
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.									
	Do r	not include any	amounts already included in lines 2-10 or amounts that	at are no	t available to pay	expe	nses liste	ed in Sc	hed	ule J.
	Spe	cify:	, 					11.	+	\$0.00
12.	inco		n the last column of line 10 to the amount in line 11. amount on the Summary of Your Assets and Liabilities					12.		\$4,285.65 Combined monthly income
13.	Dον	ou expect an	increase or decrease within the year after you file t	his forn	n?					
	⋈	No.	None.							
		Yes. Explain:	1							
		. cc. Explain.								

Deb	Debtor 1 Ashleigh Anne Nordstrom			Case number (if known)					
5 h	Other De	uvall Dadustiana (dataila)		For Debtor 1	For Debtor 2 or non-filing spouse				
on.	Health I	yroll Deductions (details) ns.		\$80.15					
	Dental li	ns.		\$52.00					
	Vision Ir	ns.		\$19.28					
	(P.T.) 40	03(b) 2%		\$21.73					
			Totals:	\$173.16					
01-	O41 M -			For Debtor 1	For Debtor 2 or non-filing spouse				
٥n.		onthly Income (details) ome From Part Time Job		\$922.88					
	Child Su	ıpport		\$238.33					
			Totals:	\$1,161.21					

F	ill in this	information to ider	ntify your case:			Ī		
	Debtor 1	Ashleigh First Name	Anne Middle Name	Nords Last Na	strom me	. —	nis is: mended filing oplement showing	nostnetition
	Debtor 2 (Spouse, if	filing) First Name	Middle Name	Last Na	ime	chapt	er 13 expenses as ing date:	
	,	es Bankruptcy Court for t	he: DISTRICT OF S	SOUTH DA	KOTA	<u></u>	DD / \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	_
	Case numb	. ,	<u>2.0111.01 01 0</u>	, , , , , , , , , , , , , , , , , , ,		IVIIVI /	DD / YYYY	
	(if known)							
_		<u>rm 106J</u>						
		J: Your Expens						12/15
cor	rect inform	te and accurate as poss lation. If more space is e number (if known). A	needed, attach anoth nswer every question	er sheet to t				
P	art 1:	Describe Your Hou	sehold					
1.	Is this a j	oint case?						
2.	Yes.	Go to line 2. Does Debtor 2 live in a No Yes. Debtor 2 mustave dependents?	separate household? t file Official Form 106J		s for Separate Housel	hold of Debto	or 2.	
	Do not list	·	Yes. Fill out this in for each dependen		Dependent's relation		Dependent's age	Does dependent live with you?
	Debtor 2.				Daughter (High s	school)	18	□ No - ☑ Yes
	Do not sta	ite the dependents'						□ No
							_	Yes
								□ No □ Yes
								□ No
								Yes No
							_	Yes
3.	expenses	expenses include s of people other than and your dependents?	☑ No ☐ Yes					
P	art 2:	Estimate Your Ong	oing Monthly Exp	enses				
Est to i	timate your report expe	expenses as of your banses as of a date after till in the applicable date	ankruptcy filing date u	ınless you a	-			
Inc	lude expen	ses paid for with non-c ce and have included it	ash government assis	-			Your expens	es
4.		Il or home ownership ex st mortgage payments ar					4.	\$1,675.00
		uded in line 4:	, 3					
	4a. Real	estate taxes					4a	
	4b. Prop	erty, homeowner's, or rer	nter's insurance				4b.	\$16.67
	4c. Home	e maintenance, repair, ar	nd upkeep expenses				4c.	
	4d. Hom	eowner's association or c	condominium dues				4d.	

Deb	otor 1 Ashleigh Anne Nordstrom Case number	r (if kno	wn)
		<u>Yc</u>	our expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$180.00
	6b. Water, sewer, garbage collection	6b.	\$70.00
	6c. Telephone, cell phone, Internet, satellite, and cable services (See continuation sheet(s) for details) 6c.	\$375.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$750.00
8.	Childcare and children's education costs	8.	\$200.00
9.	Clothing, laundry, and dry cleaning	9.	\$150.00
10.	Personal care products and services	10.	\$75.00
11.	Medical and dental expenses	11.	\$160.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$350.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14.	Charitable contributions and religious donations	14.	\$20.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15a. 15b.	
	15c. Vehicle insurance	15b.	\$60.00
	15d. Other insurance. Specify:	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	
	Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c.	
	17d. Other. Specify: Student Loan Payment \$500	17d.	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

Deb	tor 1	Ashleigh Anne Nordstrom	Case number (if known)	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	. Specify: Misc.	21. +	\$100.00
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$4,281.67
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$4,281.67
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$4,285.65
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$4,281.67
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$3.98
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you t	file this form?	
		cample, do you expect to finish paying for your car loan within the year or do you exent to increase or decrease because of a modification to the terms of your mortgag		
	V	No.		
	□ `	Yes. Explain here: None.		

Debtor 1	Ashleigh Anne Nordstrom	Case number (if known)		
6c. Telepl	none, cell phone, Internet, satellite, and cable services (details):			
Cell p	hone		\$180.00	
Intern	et		\$45.00	
Strea	ming		\$150.00	
		Total:	\$375.00	

Fill in this information to identify your case:					
Debtor 1	Ashleigh First Name	Anne Middle Name	Nordstrom Last Name	-	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-	
United States Ba	nkruptcy Court for	r the: DISTRICT OF	SOUTH DAKOTA	-	
Case number (if known)					Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below				
Did you pay or agree to pay someone who is NO	OT an attorney to help you fill out bankruptcy forms?			
☑ No				
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.				
X /s/ Ashleigh Anne Nordstrom Ashleigh Anne Nordstrom, Debtor 1	X Signature of Debtor 2			
Date 05/14/2024 MM / DD / YYYY	Date MM / DD / YYYY			

				_	
Fill in this i	nformation to i	dentify your case	:		
Debtor 1	Ashleigh	Anne	Nordstrom		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filin	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court fo	r the: DISTRICT OF	SOUTH DAKOTA		
Case number					
(if known)				Check if this is an amended filing	
Official For	m 107				
		Affaina fan Ind	iniduala Filima fan F	Damlem vota v	0.4/06
Statement	or Financiai	Affairs for ind	lividuals Filing for E	sankruptcy	04/22
Part 1: G	Sive Details Abo	out Your Marital S	Status and Where You L	ived Before	
1. What is vo	ur current marital s	status?			
☐ Married		status .			
☑ Not ma	rried				
2. During the	last 3 years, have	you lived anywhere o	other than where you live nov	v?	
☑ No	-				
Yes. Li	ist all of the places	you lived in the last 3 y	ears. Do not include where yo	ou live now.	
(Community	•	•	• .	community property state or territory? ana, Nevada, New Mexico, Puerto Rico, Texas,	
☑ No					
Yes. M	lake sure you fill ou	t Schedule H: Your Co	debtors (Official Form 106H).		

Debtor 1	tor 1 Ashleigh Anne Nordstrom			Case number (if known)		
Part 2:	t 2: Explain the Sources of Your Income					
Fill in	you have any income from employ the total amount of income you rec u are filing a joint case and you have	eived from all jobs and all bu	ısinesses, including par	t-time activities.	llendar years?	
	No ⁄es. Fill in the details.					
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
	uary 1 of the current year until	₩ages, commissions, bonuses, tips	\$19,686.91	Wages, commissions, bonuses, tips		
ino dato y	ou mou for build aproy.	Operating a business		Operating a business		
	alendar year:	✓ Wages, commissions, bonuses, tips	\$83,514.00	☐ Wages, commissions, bonuses, tips		
(January 1	1 to December 31,	Operating a business		Operating a business		
For the ca	alendar year before that:	₩ages, commissions, bonuses, tips	\$65,654.00	☐ Wages, commissions, bonuses, tips		
(January 1	1 to December 31,	Operating a business		Operating a business		
Include unem and g		at income is taxable. Examp payments; pensions; rental ir u are filing a joint case and y	les of other income are ncome; interest; dividend ou have income that you	ds; money collected from la u received together, list it o	awsuits; royalties;	
□ ^	each source and the gross income froone froo	om each source separately.	Do not include income	that you listed in line 4.		
		Debtor 1		Debtor 2		
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	
	uary 1 of the current year until ou filed for bankruptcy:					
For last c	alendar year:					
	I to December 31, 2023)					
For the ca	alendar year before that:	Gambling winnings	\$32,873.00			
	1 to December 31, 2022)	Gambling losses Gambling earnings	(\$29,936.00) \$5,937.00			

Del	otor 1	Ashleigh Anne Nordstrom	Case number (if known)
P	art 3:	List Certain Payments You Made Before You Filed f	or Bankruptcy
6.	Are eith	ither Debtor 1's or Debtor 2's debts primarily consumer debts?	
	□ No.	o. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. "incurred by an individual primarily for a personal, family, or house	- , ,
		During the 90 days before you filed for bankruptcy, did you pay any	creditor a total of \$7,575* or more?
		☐ No. Go to line 7.	
		Yes. List below each creditor to whom you paid a total of \$7,57 total amount you paid that creditor. Do not include payments child support and alimony. Also, do not include payments	ents for domestic support obligations, such as
		* Subject to adjustment on 4/01/25 and every 3 years after that for	cases filed on or after the date of adjustment.
	✓ Yes.	es. Debtor 1 or Debtor 2 or both have primarily consumer debts.	
		During the 90 days before you filed for bankruptcy, did you pay an	r creditor a total of \$600 or more?
		✓ No. Go to line 7.	
		Yes. List below each creditor to whom you paid a total of \$600 creditor. Do not include payments for domestic support of Also, do not include payments to an attorney for this bank	bligations, such as child support and alimony.
7.	Insiders corporati agent, in	n 1 year before you filed for bankruptcy, did you make a payment of pays include your relatives; any general partners; relatives of any general rations of which you are an officer, director, person in control, or owner or, including one for a business you operate as a sole proprietor. 11 U.S. as child support and alimony.	partners; partnerships of which you are a general partner; of 20% or more of their voting securities; and any managing
	✓ No ☐ Yes.	o es. List all payments to an insider.	
8.		n 1 year before you filed for bankruptcy, did you make any payment ited an insider?	s or transfer any property on account of a debt that
		le payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes.	o es. List all payments that benefited an insider.	
Р	art 4:	Identify Legal Actions, Repossessions, and Foreclo	sures
9.	List all s	n 1 year before you filed for bankruptcy, were you a party in any lav I such matters, including personal injury cases, small claims actions, divided in the contract disputes.	
	✓ No ☐ Yes.	o es. Fill in the details.	

Deb	tor 1	Ashleigh Anne Nordstrom	Case number (i	f known)	
10.	seized,	1 year before you filed for bankrup or levied? all that apply and fill in the details belo	tcy, was any of your property repossessed, foreclos	sed, garnished, at	tached,
	_	Go to line 11. Fill in the information below.			
			Describe the property	Date	Value of the property
_		Management	Garnishment of Wages:		
Crec	litor's Nam	e	05/10/24 \$295.41		
Num	ber Str	eet	Explain what happened		
			Property was repossessed.		
			Property was foreclosed.		
			Property was garnished.		
City		State ZIP Code	Property was attached, seized, or levied.		
11.	amount No	•	ptcy, did any creditor, including a bank or financial make a payment because you owed a debt?	institution, set of	fany
	_				
12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?				e benefit of	
	✓ No ☐ Yes				
P	art 5:	List Certain Gifts and Con	tributions		
13.	Within	2 years before you filed for bankru	ptcy, did you give any gifts with a total value of mor	e than \$600 per p	erson?
	✓ No ☐ Yes	s. Fill in the details for each gift.			
14.		2 years before you filed for bankru charity?	ptcy, did you give any gifts or contributions with a t	otal value of more	e than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or co	ntribution.		
P	art 6:	List Certain Losses			
15.		1 year before you filed for bankrup isaster, or gambling?	tcy or since you filed for bankruptcy, did you lose a	nything because	of theft, fire,
	□ No ☑ Yes	s. Fill in the details.			
the loss occurred Include the amount to			Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend	Date of your ling loss	Value of property lost
		osses	insurance claims on line 33 of Schedule A/B: Property	2022	\$26,936.00
			Describe any insurance coverage for the loss	Date of your	Value of property
	loss occ	e property you lost and how urred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend insurance claims on line 33 of <i>Schedule A/B: Property</i>		Value of property lost
Gambling losses		osses			\$36,092.00

Debtor 1	Ashleigh Anne Nordstrom		Case number (if kn	own)	
Part 7: List Certain Payments or		r Transfers			
anyo	ne you consulted about seeking ba	uptcy, did you or anyone else acting or ankruptcy or preparing a bankruptcy pe preparers, or credit counseling agencies	etition?		-
		,	1	,	
Thomas Person Who	Blake Law Office	Description and value of any proper See Attorney Disclosure.	ty transferred	Date payment or transfer was made	Amount of payment
505 W 9t	h St, Ste 202 Street	_			
Sioux Fa	Ils SD 57104 State ZIP Code	- -			
Email or web	bsite address	_			
17. Withi anyon Do no	ne who promised to help you deal of include any payment or transfer the	uptcy, did you or anyone else acting or with your creditors or to make paymen at you listed on line 16.			erty to
prope Includ	erty transferred in the ordinary cou de both outright transfers and transfe	ruptcy, did you sell, trade, or otherwise irse of your business or financial affair rs made as security (such as granting of have already listed on this statement.	s?		
	lo 'es. Fill in the details.				
Ramo Automotive Salvage Person Who Received Transfer		property transferred re		property or payments bts paid in exchange yard for \$500.	Date transfer was made March, 2024
Number Street		(not running; body damage to front and passenger back doors; dents and dings - junk)			
City	State ZIP Code	_			
Person's re	elationship to you Non-Related	_			
you a ☑ N	are a beneficiary? (These are often	kruptcy, did you transfer any property n called asset-protection devices.)	to a self-settled tru	ist or similar device	of which

Debtor 1	Ashleigh Anne Nordstro	m	Case number (i	f known)	
Part 8:	8: List Certain Financial Accounts, Instruments, Safe Depos			nd Storage Units	
20. Withi bene	in 1 year before you filed for b fit, closed, sold, moved, or tra de checking, savings, money ma	arket, or other financial accounts; ce	ertificates of deposit; share	-	
house	es, pension funds, cooperatives	, associations, and other financial ir	nstitutions.		
	√es. Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	erstate Bank (closed) nancial Institution				
	re balance) Street	xxxx	✓ Checking✓ Savings✓ Money market✓ Brokerage✓ Other		
City	State ZIP Cod	de			
for so	ecurities, cash, or other valual No Yes. Fill in the details.	within 1 year before you filed for l bles?	оапктирісу, апу ѕаїе цер	osit box or other dep	ository
☑ N	you stored property in a stora No Yes. Fill in the details.	age unit or place other than your l	home within 1 year before	you filed for bankru	ptcy?
_		u Hold or Control for Someony that someone else owns? Inclu		owed from, are stori	ng for,
	No ⁄es. Fill in the details.				
		Where is the property?	Describe the	property	Value
Landlord Owner's Nai		_		, microwave,	
Number	Street	Number Street	washer and landlord.	dryer owned by	
City	State ZIP Code	City State ZIF	² Code		
,		Where is the property?	Describe the	property	Value
Employers Owner's Name		_	Laptops (2) employers I Associates	Pulmonary Sleep	
Number	Street	Number Street		and Avoidi	
		_			
City	State ZIP Code	City State 7II	P Code		

Debt	or 1 Ashleigh Anne Nordstron	1	Case number (if known)	
	oloyer/Friends/Family r's Name	Where is the property?	Describe the property Debtor borrows vehicles from friends, family and employer when needed.	Value
Numb	er Street	Number Street	-	
City	State ZIP Code	City State ZIP Code	_	
	rt 10: Give Details About En	vironmental Information		
ir Su	icluding statutes or regulations cont ite means any location, facility, or putilize it or used to own, operate, or unaximaterial means anything a ubstance, hazardous material, pollut	an environmental law defines as a hazard	wastes, or material. ntal law, whether you now own, operate dous waste, hazardous substance, toxi	e, or
24.	•	you that you may be liable or potentially	•	nmental
25.		unit of any release of hazardous materia	al?	
	Have you been a party in any judicia orders.	l or administrative proceeding under any	y environmental law? Include settleme	nts and
	☑ No ☐ Yes. Fill in the details.			

Debtor 1	Ashleigh Anne Nordstrom	Case number (if known)
Part 11	: Give Details About Your Business or Connec	tions to Any Business
27. Within	n 4 years before you filed for bankruptcy, did you own a bu	siness or have any of the following connections to any
 	A sole proprietor or self-employed in a trade, profession, or A member of a limited liability company (LLC) or limited liab A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of	ility partnership (LLP)
28. Withi	o. None of the above applies. Go to Part 12. es. Check all that apply above and fill in the details below for e n 2 years before you filed for bankruptcy, did you give a financial institutions, creditors, or other parties.	
	o es. Fill in the details below.	

Debtor 1	Ashleigh Anne Nordstrom	Case number (if known)
Part 12	Sign Below	
that the ar	nswers are true and correct. I unde	nancial Affairs and any attachments, and I declare under penalty of perjury tand that making a false statement, concealing property, or obtaining money or tcy case can result in fines up to \$250,000, or imprisonment for up to 20 years,
	nleigh Anne Nordstrom h Anne Nordstrom, Debtor 1 05/14/2024	X Signature of Debtor 2 Date
Did you at	tach additional pages to Your State	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	ay or agree to pay someone who is	ot an attorney to help you fill out bankruptcy forms?
✓ No ☐ Yes. N	Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration and Signature (Official Form 119)

Fill in this information to identify your case:						
Debtor 1	Ashleigh First Name	Anne Middle Name	Nordstrom Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: DISTRICT OF SOUTH DAKOTA						
Case number (if known)						

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Debtor 1	Ashleigh Anne Nordstrom		Case number (if known)
Part 3:	Sign Below		
	penalty of perjury, I declare that I ha nal property that is subject to an une		ed my intention about any property of my estate that secures a debt and se.
	hleigh Anne Nordstrom gh Anne Nordstrom, Debtor 1	x	Signature of Debtor 2
	05/14/2024 MM / DD / YYYY		Date MM / DD / YYYY

F	ill in this inf	ormation to id	entify your case	:		box only as dire	
D	ebtor 1	Ashleigh	Anne	Nordstrom	form and	n Form 122A-1Su	pp:
		First Name	Middle Name	Last Name	1.There is	no presumption of abus	se.
D (S	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	of abuse	ulation to determine if a applies will be made u est Calculation (Official	nder Chapter 7
U	nited States Ba	nkruptcy Court for	the: DISTRICT OF	SOUTH DAKOTA		ns Test does not apply	
_	ase number f known)					ed military service but i	
					Check if t	his is an amended filing]
Of	ficial Form	122A-1					
Cł	napter 7 S	tatement of	Your Current	Monthly Income			12/19
info are mil 122	ormation applic exempted from itary service, o A-1Supp) with	es. On the top of a m a presumption of complete and file S this form.	any additional pages of abuse because yo	heet to this form. Include the s, write your name and case ou do not have primarily contion from Presumption of Alancome	number (if knowr sumer debts or be	n). If you believe that y ecause of qualifying	you
1.	What is your	marital and filing	status? Check one of	only.			
	⋈ Not mar	ried. Fill out Colun	nn A, lines 2-11.				
	_	and your spouse	is filing with you. Fi	ill out both Columns A and B,	lines 2-11.		
	☐ Married	and your spouse	is NOT filing with yo	ou. You and your spouse ar	e:		
	_	ing in the same ho	ousehold and are no	t legally separated. Fill out b	ooth Columns A and	I B, lines 2-11.	
	dec	lare under penalty	of perjury that you an	d. Fill out Column A, lines 2-1 d your spouse are legally sep s that do not include evading	arated under nonb	ankruptcy law that appli	es or that you
	bankruptcy of August 31. If in the result.	case. 11 U.S.C. § the amount of you Do not include any	101(10A). For example monthly income variation	ed from all sources, derived ole, if you are filing on Septen ied during the 6 months, add to be than once. For example, if I have nothing to report for any	nber 15, the 6-mont the income for all 6 both spouses own t	th period would be Mard months and divide the he same rental property	ch 1 through total by 6. Fill
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	-	vages, salary, tips yroll deductions).	, bonuses, overtime	, and commissions	\$4,997.10		
3.	Alimony and if Column B is		ments. Do not includ	de payments from a spouse	\$0.00		
4.	expenses of regular contril your depende	you or your dependentions from an unitents, parents, and re	commates. Include re		\$238.33		

Deb	otor 1 Ashleigh Anne Nordstro	om			ase number (if k	nown)
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse
5.	Net income from operating a busing	ness, profession, d	or farm			
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00		_		
	Ordinary and necessary operating expenses	\$0.00		— Сору		
	Net monthly income from a business profession, or farm	\$0.00		here	\$0.00	
6.	Net income from rental and other	real property				
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00		_		
	Ordinary and necessary operating expenses	\$0.00		— Copy		
	Net monthly income from rental or other real property	\$0.00		_ here →	\$0.00	
7.	Interest, dividends, and royalties				\$0.00	
8.	Unemployment compensation				\$0.00	
	Do not enter the amount if you conte benefit under the Social Security Act					
	For you		\$0	0.00		
	For your spouse					
9.	Pension or retirement income. Do was a benefit under the Social Securnext sentence, do not include any coallowance paid by the United States disability, combat-related injury or disuniformed services. If you received of title 10, then include that pay only amount of retired pay to which you wunder any provision of title 10 others.	rity Act. Also, exce ompensation, pension Government in con sability, or death of any retired pay paid to extent that it doe yould otherwise be e	pt as stated in the on, pay, annuity, nection with a a member of the d under chapter 6 es not exceed the entitled if retired	e or s1	\$0.00	
10.	Income from all other sources not amount. Do not include any benefits payments received as a victim of a vinternational or domestic terrorism; or allowance paid by the United Statt disability, combat-related injury or diuniformed services. If necessary, list and put the total below.	s received under the war crime, a crime a or compensation, pe es Government in c sability, or death of	e Social Security against humanity, ension, pay, annu connection with a a member of the	Act; or ity,		
	Total amounts from concrete	if any				
	Total amounts from separate pages,	п any.		+		+

Deb	tor 1	Ashleigh Anne Nordstrom			Case number (if known)		
	Add li Then	ines :	your total current monthly income. 2 through 10 for each column. the total for Column A to the total for Colu		Column A Debtor 1 Debtor 2 or non-filing spouse \$5,235.43 + = \$5,235.43 Total current monthly income		
	art 2:		Determine Whether the Means T	est Applies to You			
12.			your current monthly income for the year	·			
	12a.	Cop	by your total current monthly income from	line 11			
		Mul	tiply by 12 (the number of months in a yea	ar).	X 12		
	12b.	The	e result is your annual income for this part	of the form.	12b. \$62,825.16		
13.	Calcu	ulate	the median family income that applies	to you. Follow these steps:			
	Fill in the state in which you live. South Dakota			South Dakota			
	Fill in	the r	number of people in your household.	2			
	Fill in	the r	median family income for your state and s	ize of household	13. \$83,730.00		
			ist of applicable median income amounts, s for this form. This list may also be avai				
14.	. How do the lines compare?						
	14a.	V	Line 12b is less than or equal to line 13. Go to Part 3. Do NOT fill out or file Offic		box 1, There is no presumption of abuse.		
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>Th</i> Go to Part 3 and fill out Form 122A-2.			op of page 1, check box 2, <i>The</i>	presumption of abuse is determined by Form 122A-2.		
P	art 3:		Sign Below				
	Rv s	sianir	ng here. I declare under negalty of periury	that the information on this st	atement and in any attachments is true and correct.		
	Буз	sigiiii	ig fiele, i deciale under penalty of perjury	that the information on this st	atement and in any attachments is true and correct.		
	V	lel A	shleigh Anne Nordstrom	v			
			eigh Anne Nordstrom, Debtor 1	X Sign	ature of Debtor 2		
	[Date _.	5/14/2024 MM / DD / YYYY	Date	MM / DD / YYYY		
	If yo	ou ch	ecked line 14a, do NOT fill out or file Forr	n 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this form.						